

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000095837

**FILED**  
**Apr 19, 2011**  
**Secretary of State**

**Entity Name:** WARREN MIDDLETON INSURANCE, LLC

**Current Principal Place of Business:**

6282 LAKE OSPREY DRIVE  
LAKEWOOD RANCH, FL 34240

**New Principal Place of Business:**

6282 LAKE OSPREY DRIVE  
SARASOTA, FL 34240

**Current Mailing Address:**

PO BOX 18726  
SARASOTA, FL 34276

**New Mailing Address:**

**FEI Number:** 27-1060408

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MIDDLETON, WARREN  
6282 LAKE OSPREY DRIVE  
LAKEWOOD RANCH, FL 34240 US

**Name and Address of New Registered Agent:**

MIDDLETON, WARREN  
6282 LAKE OSPREY DRIVE  
SARASOTA, FL 34240 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

04/19/2011

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: MIDDLETON, WARREN  
Address: 6282 LAKE OSPREY DRIVE  
City-St-Zip: SARASOTA, FL 34240

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: WARREN B MIDDLETON

MGR

04/19/2011

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date